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ABSTRACT

This final report describes the activities and outcomes of a federally funded project that was designed to increase the availability of graduate level Essential Early Educators in Vermont who can: (1) provide integrated, family-centered, early childhood special education services to young children with disabilities and their families; (2) provide direct and consultative services across home, center, and inclusive community-based settings; (3) work with other agencies and disciplines to implement a comprehensive, coordinated system of services; and (4) assume the multiple education and leadership roles required for coordinating, implementing, and evaluating early childhood special education services in rural, sparsely populated settings. The project established and maintained a representative statewide Advisory Council to oversee activities related to Vermont's goals of establishing a unified system of early care, education, and intervention services. The project also succeeded in recruiting 28 participants from Head Start, Parent-Child Centers, child care, preschool and kindergarten programs to train to become Essential Early Educators. Appendices include the training strand for a master's in special education with an emphasis in Essential Early Education, and the training strand for a master's in special education with an emphasis in leadership. (CR)

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H029Q30017

PREPARATION OF PERSONNEL TO PROVIDE EARLY INTERVENTION SERVICES TO INFANTS AND TODDLERS WITH DISABILITIES

Essential Early Education Reach Out Program

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FINAL REPORT



The University Affiliated Program of Vermont University of Vermont 499C Waterman Building Burlington, Vermont 05405-0160

FINAL REPORT

84.029Q

Essential Early Education Reach Out Program

I. INTRODUCTION

This is the final report for 84.029Q Preparation of Personnel to Provide Early Intervention Services to Infants and Toddlers with Disabilities. This project entitled Essential Early Education Reach Out Program was designed to increase the availability of graduate level Essential Early Educators who can: 1) provide integrated, family-centered, early childhood special education services to young children with disabilities and their families: 2) provide direct and consultative services across home, center, and inclusive community-based settings; 3) work with other agencies and disciplines to implement a comprehensive, coordinated system of services that is responsive to family identified priorities, and 4) assume the multiple education and leadership roles required for coordinating, implementing, and evaluating early childhood special education services in rural, sparsely populated settings. Specifically, the Essential Early Education Reach Out program was designed to meet the needs of in-place professionals who provide services to Vermont's young children with disabilities and their families in remote areas across the state. The Essential Early Education Reach Out program was offered in the southeastern region of Vermont during years one and two, and the northern and southwestern region during years three and four.



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Specifically, the project had three goals:

- 1. Maintain a representative statewide Advisory Council which will meet at least annually to review program goals, objectives, recruitment and selection strategies, course content, and practica requirements.
- 2. Prepare at least 24 in-place early childhood/early childhood special education professionals.
- 3. Implement the evaluation plan.

II. PROJECT ACCOMPLISHMENTS

a. Advisory Council

In year three of the project Vermont's Early Childhood Steering

Committee began serving in an advisory capacity. This transition was a reflection of a state movement to create a statewide, unified system of early childhood services. In 1996 the state of Vermont established a state level

Early Childhood Steering Committee comprised of representatives from key programs, agencies, and projects serving young children (birth to five) and their families (see appendix A for membership). This steering committee was designed to oversee activities related to Vermont's goal of establishing a unified system of early care, education, and intervention services. One of the major responsibilities of this committee is to advise and oversee all state and federal projects and initiatives focusing on Vermont's early care, education and intervention community. Due to its comprehensive membership and its connection to Vermont's Early Childhood Work Group, this steering committee was uniquely qualified to meet these responsibilities and to advise the Reach Out program. Steering committee members reviewed



project activities and content relative to the project's ability to be responsive to the training needs of Vermont's early care, education and intervention community. In addition to providing positive feedback, steering committee members identified two issues the project should address.

Issue #1: To assure there exist a cadre of early childhood professionals prepared to meet the needs of young children with disabilities in inclusive, community-based child care and preschool settings.

The Reach Out project responded to this issue in two ways. First, considerable effort was expended to recruit participants from Head Start, Parent-Child Centers, child care, preschool, and Kindergarten programs to enroll in the second cohort group. While many of these participants were excited about completing a master's in Early Childhood Special Education and receiving certification as: Teacher of the Handicapped: EEE; a significant number of participants were not interested in certification. In response, project staff designed a "training strand" for early childhood professionals who: 1) were working with young children with disabilities and their families in inclusive, community-based settings; 2) wanted a Master's in Special Education with and emphasis in Essential Early Education; 3) did not want certification. Competencies and portfolio requirements for this strand can be found in Appendix B.

Issue #2: Availability of personnel to assume leadership roles in early childhood special education.

At the most recent Early Childhood Steering Committee meeting, council members identified a early childhood leadership as a critical need.



Council members engaged in an intense dialogue that spoke to the fact that in addition to providing quality services to children and families, early childhood special educators must be prepared to provide leadership to an evolving field. In recent years, states' commitments to young children have expanded, yielding an increasingly diverse and complex set of early childhood special education services (Kagan & Bowman, 1997). This is also the case for Vermont which has experienced a rapid growth of early childhood initiatives over the last 8-10 years. The need for strong leadership has grown along with the challenges presented by this expansion to insure that families of young children with disabilities continue to receive high quality services from a coordinated delivery system that is community-based, collaborative, family-centered and developmentally appropriate. Challenges stem from the fact that services for young children with disabilities are in diverse settings, embedded in several different professions, under the auspices of a number of institutional contexts (including public schools, Head Start, child care centers, family day care), and provided by child care personnel with varying levels of preparedness and training (Bowman, 1997). Project staff developed have developed a leadership strand. This strand was incorporated into an application submitted to the Federal Office of Special Education Programs in May of this year. Program competencies and portfolio requirements for this strand can be found in Appendix C.

b. Project Participants

A total of 28 trainees participated in the EEE Reach Out Program. Fifteen trainees have successfully completed the program, it is anticipated that additional 5 trainees will complete the program by December 1998 and



the final eight by June 1999. Trainees represent the disciplines of early childhood, early childhood special education, speech/language pathology, guidance, primary education, physical education, and art. In addition, trainees worked in an array of early childhood settings including: Essential Early Education, Chapter One, Head Start, Parent Child Centers, Kindergarten, and elementary guidance programs, and community child care and preschool programs. Sixteen participants received (will receive) Vermont certification as Teacher of the Handicapped: EEE upon successful completion of the program. The remainder of the participants completed (or will complete) either a thirty or thirty-three credit master's degree in Special Education with an emphasis in Essential Early Education. Table 1 that follows presents an overview of trainees.

Table #1
Reach Out Participants

Student	Discipline/	Completed	Certified	Current
	Field			Position
1	EEE	Yes	Yes	EEE teacher
2	EEE	Yes	Yes	EEE teacher
3	SLP	Yes	Yes	EEE teacher
4	SLP	Yes	Yes	EEE teacher
5	Guidance	Yes	No	Early Child. Guidance
6	Phys. Ed.	Yes	Yes	Early Child. Phys. Ed.
7	Art	Yes	Yes	EEE teacher
8	Early Child.	Yes	No	Early Childhood
9	Early Child.	Yes	Yes	Preschool Lab Prog.
10	Early Child	No	No	Child Care
11	Early Child	No	No	Child Care
12	SLP	No	Yes	Early Child SLP
13	Early Child	No	Yes	Paraprofess. Early Child



Student	Discipline/ Field	Completed	Certified	Current Position
14	Early Child	No	No	University Lab Preschool
15	Head Start	No	No	Head Start
16	EEE	No	No	EEE
17	Kind	Yes	No	Kind
18	SLP	Yes	Yes	EEE
19	Early Childho	oYdes	Yes	EEE
20	Kind	Yes	Yes	Kind
21	Parent Child Center	Yes	No	Parent Child Center
22	Early Child	No	No	Parent to Parent
23	Head Start	No	Yes	Head Start
24	Head Start	No	No	Head Start
25	EEI	No	Yes	EEI
26	Early Child	No	Yes	Early Child Paraprof.
27	Kind	No	Yes	Kind
28	Early Child	Yes	Yes	Internship

c. Program Evaluation

The Reach Out evaluation plan collected both student and program evaluation data.

Student Evaluation Data: Trainees were evaluated to determine the extent to which each demonstrated required competencies. Performance competencies were assessed through direct observation of student performance, review of student's written practicum-related materials, and feedback from families with whom the trainee was working. Program faculty observed and talked with students every other week (on average) to identify competencies that had been mastered and to plan remediation/alternative experiences as necessary. Knowledge-based competencies were assessed primarily through coursework including: participation in class discussions, reflection and research papers. Trainees who demonstrated all required



program competencies and completed all coursework with a grade of A or B were eligible for graduation. In addition, all trainees were required to complete an oral exam and complete a professional portfolio.

Oral Exam: Oral exams are scheduled once trainees successfully completed (or are in their final semester of) coursework. Each trainee is required to prepare an oral's packet that includes: philosophy of providing services for young children with disabilities and their families; a personal statement outlining the impact of the Reach Out program on professional development and program practice; and a polished research project. Over the course of the project trainee's have presented research on issues such as: Father Involvement in Early Intervention; Facilitating Literacy in Young Children with Down Syndrome; The Impact of Book Writing on the Development Early Literacy Skills; Positive Transition Planning; Conducting Effective Play-Based Screening. Orals presentations provided an opportunity to evaluate trainee's ability to present material in a concise, coherent, reflective manner, as well as their ability to "think on their feet" and respond to questions addressing key issues facing the field.

Professional Portfolio: Trainees are required to prepare a professional portfolio presenting their understanding of, reflections on, and accomplishments related to the five philosophical dispositions that frame the Reach Out Program (i.e., Cultural Competence, Family-Centered Practice, Developmentally Appropriate Practice, Inclusion, Collaboration). All portfolios are reviewed by project faculty. Portfolios have provided a rich source of information relative to the impact of program content and activities on the practice of in-place professionals. Trainees have



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documented program change in areas such as: placing play at the center of the curriculum, working with parents to develop new procedures for documenting child progress, involving parents in program decisions, translating an emergent curriculum approach into practice. Portfolios have provided tangible evidence of the impact of the Reach Out Program on the context of services for young children with disabilities and their families across the state of Vermont.

Program Evaluation Data: Project staff have collected a variety of program evaluation data including: course evaluation, practicum evaluation; advisor/supervisor evaluation, and student evaluation of the overall personnel preparation program. In each instance, trainees are required to complete a evaluation instrument and an open-ended questionnaire. Responses to both have been extraordinarily positive. Program evaluation data has been compiled and is presented in Appendix D.



Appendix A Advisory Council Membership



ADVISORY COUNCIL

Kathy Andrews
Department of Education
120 State Street
Montpelier, VT 05620-2501

Jane DiFerdinando Success By Six Coordinator 150 Colchester Avenue Burlington, VT 05401

Nancy Divenere
Parent to Parent of Vermont
Champlain Mill #69
1 Main Street
Winooski, VT 05404

Beverly Frank
Parent of a child with a disability
RD1, Box 7930
Underhill, VT 05489

Kim Keiser Child Care Services Division 103 South Main Street Waterbury, VT 05676

Beverly MacCarty
Family, Infant and Toddler Project
108 Cherry Street
Burlington, VT 05401

Karen Mikkelsen NERRC - Trinity College McCauley Hall 208 Colchester Avenue Burlington, VT 05401

Cheryl Mitchell Agency of Human Services 103 South Main Street Waterbury, VT 05671-0201 Howdy Russell
Parent Child Coordinator
P.O. Box 646
11 Monroe Street
Middlebury, VT 05468

Jim Squires Vermont Department of Education 120 State Street Montpelier, VT 05620

Mark Sustic Early Childhood Spe. Prog. Director P.O. Box 163 Fairfax, VT 05454

Jan Walker
State Department of SRS
Child Care Services Division
103 So. Main Street
Waterbury, VT 05671

K.C. Whitely
Head Start
Agency of Human Services
103 So. Main Street
Waterbury, VT 05676



Appendix B

Training Strand for Master's In Special Education with an Emphasis in Essential Early Education (no certification)



Vermont LEEDS Graduate Program

Guidelines for Developing a Portfolio for M.Ed./Non-Licensure Strand and Program Competencies



Portfolio Guide Contents

Why Develop a Portfolio?

How this Guide Can Help You Create Your Portfolio

What Should Your Finished Portfolio Look Like?

The Six Philosophical Assumptions

The Components of Special Education

Practica Requirements

Self Assessment of Core Competencies: Category One

Self Assessment of Competencies: Category Two M.Ed./Non-Licensure

References



Why Develop A Portfolio?

A portfolio serves as a site for documentation of your professional development. It is a dynamic form of documentation, emerging and changing as you develop as a professional. Developing a portfolio is somewhat like creating a photo album. As a photo album serves to give visual evidence of the growth and development of your family, a portfolio provides evidence of your growth and development as a professional.

As a educational professional, you may find a maintaining a portfolio is required as part of your Individual Professional Development Plan in your employment contract. Additionally, portfolios are valuable in job interviews and in preparing for licensure.

This guide has been developed to help you create a portfolio that documents your specialized expertise in Early Childhood Special Education. This portfolio will document your commitment to the philosophical assumptions of inclusion, developmentally appropriate practice, cultural competence, the uniqueness of early childhood as a developmental phase, family-centered practice, and inter- and intra-professional collaboration and your ability to integrate these beliefs into the provision of services for young children with disabilities and their families.

Completion of this portfolio will serve as a testimony to your proficiency as a early childhood special educator with commitment to and competence in providing services that are inclusive, family-centered, culturally competent, collaborative, developmentally appropriate and that reflect the uniqueness of early childhood as a developmental phase.



How This Guide Can Help You Create Your Portfolio

This portfolio guide is intended to help you construct a portfolio profiling your professional development accomplishments related to Early Childhood Special Education. You will have chosen to concentrate on one of the three following strands of this graduate program:

Strand One: Masters of Education/Licensure

Strand Two: Masters of Education/Non-licensure

Strand Three: Certificate of Advanced Study/Leadership

When completed, your portfolio should establish your clear and in-depth understanding of the six philosophical assumptions that support the development of high quality, comprehensive services for all young children and their families, including those with and without disabilities. Those six philosophical assumptions are described in greater detail in the "Six Philosophical Assumptions" section of this guide. Additionally, as students in this Early Childhood Special Education Graduate program, you should also establish your expertise related to the provision of specialized services for young children with disabilities. The section entitled "The Components of Special Education" describes the areas of special education in which you will be developing competence and through which you will be applying the six philosophical assumptions.

Since all graduate students participate in practica, a "Practica Requirements" section has been included in this guide which describes the practica requirements for each strand in greater detail.

Practica experiences, in conjunction with course work, provide an opportunity for students to document specific competence. A <u>Self</u>
Assessment of Core Competencies has been created to serve as a record for your increasing confidence in each competency area. A



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specific self assessment for each strand is included in this portfolio guide and should be completed and included in your portfolio. The "Reference" section of this portfolio guide contains a list of sources you can consult in your studies.



What Should Your Finished Portfolio Look Like?

Your portfolio should be divided into eight sections.

Sections 1-6:

Each section labeled for one of the following six philosophical assumptions:

- 1. Inclusion
- 2. Developmentally Appropriate Practice
- 3. Cultural Competence
- 4. Uniqueness of Early Childhood as a Developmental Phase
- 5. Family-Centered Practice
- 6. Inter- and Intra-Professional Collaboration

Each of the six sections should contain:

- a. a narrative component that includes:
 - a) a review of the literature related to that philosophical assumption,
 - b) a discussion of the implications for applying the assumption in general practice, and
 - c) the implications specific to the implementation of each the following special education activities:
 - *child find/screening
 - *comprehensive evaluation
 - *IEP or IFSP
 - *consultation/collaboration
 - *transition.
- b. a description of a project you have undertaken and completed that provides evidence of your understanding of this section's particular philosophical assumption and demonstrates your ability to imbed it in your practice.



Section 7:

A case study of a child, a family or an issue in which you:

- a) integrate the perspective of all six philosophical assumptions
- b) honestly assess your strengths and challenges in relation to each philosophical belief
- c) identify areas for future professional development

Section 8:

A completed <u>Self Assessment of Core Competencies</u> specific to your chosen strand of the Early Childhood Special Education Graduate Program.



The Six Philosophical Assumptions

Inclusion

Inclusion involves not merely the physical placement of a child with disabilities in the same setting with other typically developing children of a similar age, but the true involvement of that child in the interactions and activities of occurring to the greatest degree possible. Educators who are committed to inclusion are able to integrate their knowledge of the needs of young children with disabilities and appropriate interventions with an ability to provide age appropriate and individually appropriate services to all of the children with whom they work. Educators committed to inclusion can function in the diverse range of community settings in which young children and families receive services and can modify or adapt activities and materials to address the diverse, individual needs of young children and their families.

Developmentally Appropriate Practice

The design of learning opportunities that facilitate children's active engagement and participation in their environment is critical to providing an environment that supports children's optimal development (Bredekamp, 1987). Such learning opportunities should maximize children's opportunities to make choices, value children's interests, and emphasize play and enjoyment. Careful planning that reflects an understanding of both age appropriate and individually appropriate practice is an essential activity of educators providing early care and educational services to young children, including those with disabilities.



Cultural Competence

All development and learning occurs within and is influenced by a cultural context. There are essentially five elements of cultural competence: a) valuing diversity; b) cultural assessment; c) dynamics of difference; d) institutionalization of cultural knowledge; and e) adaptation to diversity. Culturally competent educators are aware of their own values and how they have impacted their lives, but are able to separate their personal value judgments when working with children and families with diverse experiences and backgrounds. Culturally competent practitioners seek to learn about and respond to families in an individually appropriate and culturally appropriate manner.

Uniqueness of Early Childhood as a Developmental Phase

The unique developmental needs of young children require a supportive learning environment structured to be responsive to those needs (Carta, Schwartz, Atwater & McConnell, 1991). A knowledge of the sequence of development (birth to 5), an understanding of the interrelationship between the development of young children and the impact of disability on development, and subsequent implications for intervention are essential to the intervention process (McCollum, 1989; ATE & NAEYC, 1991a).



Family Systems and Family-Centered Approach

Establishing relationships with families ensures continuity between families and providers (Powell, 1994). These relationships should be built on mutual support of each other's roles, upon a commitment to joint decision-making, and upon respect for family choices and preferences for their level of involvement (Garshelis & McConnell, 1993). Competent family-centered practitioners understand the experiences of families of young children, including those with disabilities; are knowledgeable about specific strategies to establish and maintain productive relationships with families with diverse needs, experiences, and preferences; and clearly understand specific legal requirements (Wolery, Strain, Bailey, 1992; Bredekamp, 1993).

Inter- and Intra- Professional Collaboration

Collaborative relationships with family members, peers of the same discipline, and individuals from other disciplines as members of teams are essential to ensure the provision of family-centered, culturally competent, services that support the full inclusion of young children with disabilities in community settings. In addition to the provision of direct service, effective professionals consult with colleagues, build interpersonal relationships, communicate with related service professionals, and provide technical assistance to others.



SPECIAL EDUCATION COMPONENTS

Child Find/Screening

Child Find/ Screening is a process of seeking out young children within a school district who may be in need of special educational services. The process provides opportunities for all families to learn more about their child's development and community resources. It involves gathering information from a variety of sources, including interviews with parents, observing children and administering valid and reliable standardized and non-standardized instruments. Interpreting and discussing screening results with families to determine "next steps" is a vital component.

Comprehensive Evaluation Process

The comprehensive evaluation process involves the compilation of information that gives a picture of a child's strengths and needs, and family concerns and priorities for the purpose of making decisions relative to diagnosis, eligibility, placement and planning for specialized services.

The process involves selecting and using a variety of appropriate assessment instruments and procedures for young children. To determine eligibility and to develop an individualized education plan (IEP), implementation of reliable and valid evaluation procedures which incorporate multi-measure, multi-source and muti-domain information-gathering activities is essential. Working with families and evaluation team members to develop an evaluation plan and utilizing family concerns, priorities and resources as they relate to the child's development is a critical aspect of the process.

Consultation/Collaboration

Consultation/Collaboration refers to the efforts on the part of all parties involved in an intervention plan (including the child's family, the early childhood community and other service providers) to work together to share ideas, information and resources to improve comprehensive service delivery for young children with disabilities and their families.



Knowledge of community resources (programs and services available for families and how to network with those resources) and the ability to establish and maintain effective family and interagency cooperation is essential.

Knowledge of and sensitivity to diverse cultural, socio-economic, developmental and psychological influences on team members are vital aspects of successful collaboration.

Individualized Education Plan (IEP)

An IEP is a written statement developed by a multi-disciplinary staffing team (including parents) that integrates the results of a multi-disciplinary team evaluation, input from the child's parents and individual team members and the curriculum of the program the child attends.

It outlines the annual goals to be met, specific instructional objectives to be accomplished, and the educational services that will assist the child in reaching the specific goals and objectives.

It reflects current trends and practices in medical, therapeutic, developmental and educational intervention for eligible children and families, as well as the legal, philosophical, and ecological foundations of intervention practices and their impact upon planning, implementing and evaluating services.

Interpreting and discussing evaluation information with families and others in a manner that is clear and understandable, supports the child and family, and facilitates the development of an appropriate program is essential. Working with families and individuals from a variety of disciplines to develop, implement, and evaluate an IEP that is responsive to family identified concerns and priorities is a key component of the process, as well.

Individualized Family Service Plan (IFSP)

An IFSP is created to respond to the unique needs of children with disabilities birth to three and their families. It acknowledges the interrelationship of children and their families and provides necessary services for both children and their family members.



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IFSPs are developed by individuals from a variety of agencies and disciplines and families in response to family identified concerns and priorities as they relate to the child within the context of their family.

Current trends and practices in medical, therapeutic, developmental and educational intervention for eligible children and families, as well as the legal, philosophical, and ecological foundations of intervention practices and their impact upon planning, implementing and evaluating services are reflected in IFSPs.

Transition Planning

Transition Planning leads to a successful transition of a child from Part H services to Part B services, from one early care and education program to another or into the local kindergarten classroom. The critical activities related to the transition planning process include such aspects as providing necessary information to key individuals, establishing a transition planning team, and communicating with the receiving program.

It is essential to be aware of family priorities and concerns, and of child characteristics that are pertinent to the development of a successful transition plan, as well as "best practices" related to transition.

Identification of necessary personnel, instructional materials, adaptive equipment, and building improvements for promoting the child's successful participation in the next setting, as well as monitoring the child's participation in the environment are all part of the transition.



Practica Requirements - Licensure and Non-Licensure Strands

- a. Instructional Programs. Trainees will development, implement, and evaluate two instructional program plans for helping an individual (parent, child, childcare worker) acquire a new skill or behavior. The content of this instructional program must be related to an outcome identified by the early childhood team and included on the IEP.
- b. Transition Planning. Trainees will participate in planning and facilitating the transition of a child to a new service delivery setting. Family goals for the transition process as well as their criteria for selecting the next setting must be included as part of an outcome statement on the IEP/IFSP.
- c. Community-Based Consultation. Trainees must consult with and assist others in the development, implementation, and evaluation of an "intervention" program within a community-based early childhood setting. The particular goals and design of this relationship will be directed by the outcomes, identified on the IEP and should be determined in collaboration with the child's family and the community setting staff.
- d. Comprehensive Evaluation. Trainees will design, implement, and evaluate two comprehensive evaluations. Answers to the questions addressed in the evaluation plan should provide the information necessary to develop an IEP.
- e. Child Find. Trainees must participate in the child find activities of a participating educational site. Trainees must assume responsibilities related to community awareness, referral process and screening.
- f. Case Study with the Family of a Child with Multiple Disabilities.

 Trainees must participate as a member of an interdisciplinary team for a child who meets multiple disabilities eligibility criteria under Vermont regulations.

 The extent and nature of the activities involved in this case study will be



determined by the family's team and will be documented in the form of the IEP and a number of related short-term action plans.

- g. Family-Based Experience. The focus of this experience is to provide trainees with the opportunity to learn directly from a family rather than from reading or attending lectures about families. This practicum component provides trainees with an in-depth experience with a family of a child with special needs. Through this experience interns will acquire an understanding of the elements of a family-centered approach and will demonstrate a working knowledge of the ways in which existing systems and policies can become more responsive to family concerns and priorities. The experience is composed of two phases: "Getting to Know the Family," and "Implementation of a Plan." This experience is designed, implemented and supervised by project staff in collaboration with Parent-to-Parent of VT.
- h. Individual Educational Program. Trainees will participate as a member of an IEP team for at least 3 children and their families. Trainees must participate in the development of an initial IEP, the revisions of an existing IEP, or the development of an IEP for the following school year. Through the IEP process trainees should focus on decisions related to the identification of goals and objectives, related services, and placement.





Vermont LEEDS

Self Assessment of Core Competencies

Trainee:	Date:	
-	·	
Discipline:	Core Faculty Advisor:	

In order to provide you with the most valuable experience possible through the Vermont LEEDS Graduate Program, it is important that we know the confidence level you have in each of the competency areas that will be emphasized. It is also important to obtain input from your core faculty advisor/mentor and other community supervisors with whom you will be working.

The confidence levels for this self assessment have been broken down into uncertain, somewhat confident, and fully confident. Your rating of yourself should be placed under S (self). Your core faculty advisor/mentor will place his/her rating under A (advisor). Collaborators in the community will place their rating under O (other).

As a pre-assessment, this information will be used to help you develop your Training Plan in collaboration with your core faculty advisor/mentor. As a dynamic assessment tool, it will provide a way for you to monitor your progress throughout your training experience with the input of your core faculty advisor/mentor and community supervisors or collaborators. As a post-assessment, this information will be used to determine the acquisition of all program competencies.



Category One Competencies

- 1. Uniqueness of Early Childhood as a Developmental Phase
 - 2. Family-Centered Approach
 - 3. Developmentally Appropriate Practice
 - 4. Inclusion
 - 5. Cultural Competence
- 6. Collaborative Interpersonal and Interprofessional Actions



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		S	A	0	8	A	0	S	A	0
A. Traine	es will demonstrate:						_			
1. Know	eledge of pre- and perinatal development.									
a.	proper care and delivery.									
b.	effects of genetics, environment, maternal health and nutrition, and other factors on the developing fetus.									
2. Know	rledge of child development.	$oxed{}$								
a .	sequences of development and the interre- lationship among developmental areas.									
b.	sensory and motor development and their influence on later cognitive, perceptual, and language skills.									
c.	the development of receptive and expressive communicative competence.									
d.	the development of perceptual learning and skills.									
е.	motivation and initiation and their develop- mental significance.									
f.	the development of cognitive skills such as problem-solving, concept formation, memory, learning, imitation and attention.									
g.	socialization, socio-emotional development, and play behavior.									
h.	the development of self-help skills and adaptive behaviors.									
1.	physical maturation, including health and nutritional needs.									
3. Impact	t of environment									
a .	knowledge of interactions among familial, cultural, social, and physical environments that enhance/prevent maximum growth and development.									
	1. social and physical environments and their influences on development.	וייט	ES	T C	g Py	AV.		ASL	H.	

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		2.	the changing environmental needs of the developing child.									
		3.	the influence of the young child on physical and social environments.									
	ъ.	theory ment.	and research in typical child develop									
		1.	major theories of child development.									
		2.	relevant research in developmental processes.									
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FAMILY-CENTERED APPROACH	UNC	ER1	AIN			HAT ENT		PULL NPID	y ent
	8	A	0	8	A	0	8	A	0
Awareness of:						•			
the importance of viewing children in the context of their families.									
the importance of viewing families in the context of their community.									
Knowledge of:						-			
 family systems (including family resources, characteristics of family and the individual members, and methods for meeting individual needs). 									
 relationships between family members and family subsystems. 									
family life cycle and the sequence of changes that occur as they progress through life events and major stages of life.									
6. factors that affect family functioning (e.g., birth of a child with a disability, availability of support).									
Skill in:									
7. gathering information from families in a way that is comfortable for family members.									
8. creating opportunities for families to share concerns, priorities, and resources on an ongoing basis.									
9. building upon family-identified strengths and abilities.									
10. encouraging families to identify informal networks and utilize them for support.									
11. communicating with families in a culturally competent manner.									
12. promoting the acquisition of parent knowledge, skills, and confidence.									
13. including families in all planning and decision- making activities at whatever level families									
choose to participate based on their values, resources, and priorities.		S	. COI	Y			SLE		



	FAMILY-CENTERED APPROACH	UNC	ERTA	VIN .	SOM	EWI FIDI		FULLY CONFIDENT			
į	·	8	A	0	8	A	0	8	A	0	
14	and intervention plans that respect family values and styles of decision making and are shaped by family priorities and information needs as well as by child characteristics and diagnostic concerns.										
15	offering help that matches the family's appraisal of their needs.		_				 				
16	. providing services that minimize disruption in daily family schedules or activities.										
17	. strengthening family-community linkages.										
18	. facilitating coordination of services and supports.										
19	seeking input and feedback from families regarding service planning and delivery, evaluation of services, and program policies and practices.										
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DEVELOPMENTALLY APPROPRIATE PRACTICE	UNC	ert <i>a</i>	IN		EWI FIDE		_	ULLY FIDE	
	8	A	0	8	A	0	8	A	0
Awareness of:					_				
 the importance the stages and sequences of child development. 									
2. the effects of environmental interactions on child development.								-	
3. the importance of play in children's learning and development.									
4. the importance of matching play materials and activities to a child's developmental levels and chronological age.									
Knowledge of:									
5. developmental sequences of child development.									
6. the interrelationship among developmental areas.									
7. the interactions among familial, cultural, social and physical environments that enhance development or prevent a child from achieving maximum growth and development.									,
 play's influence and importance in motor, social, emotional, language, and cognitive development. 									
9. the sequential development of play.									
10. developmentally appropriate toys and materials.									
11. research related to child development and the factors influencing that development.									
Skill in:									
12. recognizing and articulating an individual child's repertoire of play behaviors and interests in the context of that child's development through play-based observation.									
13. designing an optimal play environment appropriate to varied developmental levels and individual children's interests, strengths and, needs.			BE	ST (YA	JA12	ÀS	, , , , , , , , , , , , , , , , , , ,
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DEVELOPMENTALLY APPROPRIATE PRACTICE	UNC	ERTA	TN	SOM			FULLY CONFIDENT		
-	8	A	0	8	A	0	8	A	C
14. facilitating play using techniques such as modeling, imitation, elaboration and scaffold ing.	-								
15. developing activities that emphasize learning as interactive process, creating an environment that allows children to learn through active exploration and interaction with adults, other children, and materials.									
16. integrating information from parents about their child's likes, dislikes, strengths, and needs incurriculum planning.									
17. designing and choosing materials that are, concrete, and relevant to the lives of young children.									
18. designing and choosing materials that are appropriate for a wider range of developmental interests and abilities than the chronological age range of the group would suggest.									
19. including multicultural, non-sexist, and anti- biased experiences, materials, and equipment as an integral part of the curriculum.									
20. providing a balance of indoor and outdoor activities.									
21. developing, implementing and evaluating a curriculum that addresses all areas of development including physical, social emotional, communication, and cognitive through and integrated approach (e.g., curriculum planning ensures that activities designed to stimulate one area of development and learning enhance other areas as well).				•					
22. modifying or adapting goals and activities to address the individual needs of children and their families.									
23. developing, in partnership with family mem bers and other professionals, a curricular philosophy and supporting goals and activities.		B	ST	Cof	3A D	VAII	AB	E.	
	6								

	INCLUSION	UNC	ERTA	ERTAIN SOMEWHAT CONFIDENT C				TULL NPID	Y Ent	
		8	A	0	8	A	0	8	A	0
A	wareness of:									
1.	my own beliefs, values and attitudes about children and families who have different challenges and abilities from me.									
2.	the existence of legislation that articulates the rights of children and adults with disabilities.									
3.	the design and implementation of comprehensive intervention service delivery systems is determined by state and federal legislation and policy.									
4.	the various early care and education place ment options for young children in the com munity.									
Kı	lowledge of:									
5.	research related to the impact of inclusive environments on children with and without disabilities and their families.									•
6.	the exiting federal and state legislation impact- ing intervention services for children birth to five.									
7.	the concept of least restrictive environment.									
8.	various early intervention service delivery models, including strengths and limitations of those models.									
9.	the legal, philosophical, developmental, and ecological foundations for inclusion of children with disabilities with their typically developing peers in naturally occurring settings in their own communities.									
10.	the impact of medical, biological and genetic conditions on a child's development of socio-emotional, sensory, motor, language, cognitive, perceptual, and self help/adaptive skills.									
	current trends and practices in therapeutic, developmental and educational intervention.									
	BEST COPY AVAILABLE 37									



	INCLUSION	UN	ERTAIN				EWHAT FIDENT		FULL	
		S	A	0	8	A	0	s	A	0
Ski	ii in:									
	developing, implementing, and evaluating a curriculum collaboratively with parents and other professionals which addresses the developmental needs, interests and strengths of children of all abilities.									
j	developing a curriculum philosophy for an inclusive classroom, in partnership with family members and other professionals.									
	facilitating play of children of various develop- mental levels and providing play-based inter- vention.									
	designing optimal play environments for children of varying developmental levels.									
•	modifying or adapting goals, skills, activities and materials to address the individual needs of the child and family.									
	functioning as a member of a transdisciplinary intervention team.									
1	evaluating goals and activities in terms of how they relate to the successful inclusion of all children									
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CULTURAL COMPETENCE	UNC	ERT	AIN	1	SOMEWHAT CONFIDENT		PULI		:
	8	A	0	8	A	0	8	A	0
Awareness of:									
 the understanding that cultural values and beliefs are learned, have historic roots, and are the basis of our judgements. 									
 diversity as a benefit, rather than abnormal or inappropriate, and that each culture finds some values more important and some behaviors more desireable than others. 						·			
 ways in which my cultural values, beliefs and attitudes impact on the way I interact with children and families with diverse needs and from diverse backgrounds. 									
 ways in which the cultural values, beliefs and attitudes of families impact on their behavior and participation with the professionals who work with them. 									
5. verbal and nonverbal communication styles used in various cultures.				į					
6. ways in which the provision of services impacts families' opportunities to participate.						1			
Knowledge of:									
7. the social environment (family, community, school) and its impact on the development of infants, toddlers and preschoolers with, or at risk for, developmental delays or health impariments, and their families.									
8. strategies for gaining information about beliefs and practices of various ehtnic minority heritages.									
 specific cultures including their beliefs about disability, child rearing practices, and professionals. 			i i						
10. the culture of the organization in which you are interacting and how it impacts those whose culture is different.									
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CULTURAL COMPETENCE	UNC	ERT/	AIN	SOM			1 -	ULL) PIDI	•
	8	A	0	8	A	0	8	A	0
11. diverse cultural, socio-economic, develop mental and psychological influences on team members functioning together.									
11. research related to the effects of cultural values and beliefs on behavior and practices of.									
Skill in:									
12. interacting with children and families of diverse cultural and ethnic heritages in a cultrually competent manner.								1	
 providing services including child find, assessment, child care, and service coordination with increased cultural sensitivity. 									
14. developing skills for cross cultural communication.									
15. using community contacts and consultants to answer culturally related questions.									
16. institutionalizing activities which respond to conflicts and confusions caused by the dynam ics of difference.									
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COLLABORATIVE INTERPERSONAL AND INTERPROFESSIONAL ACTIONS	UNC	CERT	'AIN		MEW NFID	HAT ENT		ULL: NFIE	r Dent
	s	A	0	8	A	0	8	A	0
Awareness of:									
my own behavioral style or temperment and it's impact on my interactions with others.									
2. my strengths and needs as a member of a team.									
 the formal and informal services, and place ments available to young children and thier families in the community. 									
Knowledge of:									<u> </u>
 the functions, scope and eligibility criteria of the various agencies and services in the community available for young children and their families. 									
5. roles and functions of families and individuals representing varying disciplines and agencies within a team.									
6. varying models of team organizations									
7. adult learning styles			 						
8. diverse cultural, socio-economic, developmental and psychological influences on team members									
9. the roles and functions of a consultant, and the appropriate use of a consultant									
State Initiatives and Legislation									
10. the mandates, activities, funding, population served and relationships between various state and federal programs and initiatives for young children and their families including:									
a) Success by Six b) Early Education Initiative c) Head Start d) Essential Early Education e) Family, Infant and Toddler Project f) Child Care Services d) Children with Special Health Needs									
e) Healthy Bables () I Team									
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COLLABORATIVE INTERPERSONAL AND INTERPROFESSIONAL ACTIONS	UNC	CERT	AIN		MEW NFID		_	ULLY	
	8	A	0	8	A	0	8	A	0
11. the context, intent, and requirements of the Federal and State legislation relating to young children and young children with disabilites including:									
a) IDEA b) ADA c) Title V d) Social Security-Medicaid e) Section 504					4				•
 knowledge of community resources (programs and services available for families and how to network with those resources). 									
13. ability to establish and maintain effective family and interagency cooperation.									
14. knowledge of and sensitivity to diverse cultural, socio-economic, developmental and psychological influences on team members.									
15. knowledge of strategies for facilitating team meetings which include family members and professionals from different disciplines									
Skill in:									
16. formulating and following a professional code of ethics with associated responsibilities.								·	
17. evaluating personal strengths and needs.									
18. networking with community resources.									
19. effective listening, speaking and problem solving.									
20. strategies for facilitating team meetings which include family members and prfoessionals from different disciplines.									
21. ability to plan, establish and maintain effective family, interdisciplinary and interagency cooperation.									
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COLLABORATIVE INTERPERSONAL AND INTERPROFESSIONAL ACTIONS	UNC	UNCERTAIN SOMEWHAT CONFIDENT				FULLY CONFIDEN			
	s	A	0	8	A	0	8	A	0
22. cooperative group learning including: a) establishing mutual goals b) determining functions of team members c) sharing information d) resolving conflicts and solving problems e) providing feedback f) evaluating the effectiveness of the group process	·								
 planning, implementing and evaluating training activities for promoting the acquisition of new knowledge or skills. 									
24. establishing, implementing and maintaining a consultative relationship with family members and other key individuals (such as child care providers or therapists).									
43									
			:						
*									



Vermont LEEDS

Self Assessment of Category Two Competencies

Trainee: _	Date:
Discipline:	Core Faculty Advisor:

In order to provide you with the most valuable experience possible through the Vermont LEEDS Graduate Program, it is important that we know the confidence level you have in each of the competency areas that will be emphasized. It is also important to obtain input from your core faculty advisor/mentor and other community supervisors with whom you will be working.

The confidence levels for this self assessment have been broken down into uncertain, somewhat confident, and fully confident. Your rating of yourself should be placed under S (self). Your core faculty advisor/mentor will place his/her rating under A (advisor). Collaborators in the community will place their rating under O (other).

As a pre-assessment, this information will be used to help you develop—your Training Plan in collaboration with your core faculty advisor/mentor. As a dynamic assessment tool, it will provide a way for you to monitor your progress throughout your training experience with the input of your core faculty advisor/mentor and community supervisors or collaborators. As a post-assessment, this information will be used to determine the acquisition of all program competencies.



Category Two Competencies

- 7. Knowledge of Disabilities
 - 8. Assessment
- 9. Planning and Implementing Services
 - 10. Transition
 - 11. Program Administration



KNOWLEDG	E OF DISABILITIES	UNC	ert/	VIN .		EWI FIDI			PIDE	T
		8	A	0	8	A	0	8	A	0
Awareness of: 1. the impact of m	edical, biological and genetic							·		
2. the benefits of e	hild development. Early intervention services for with disabilities.			-	-					
3. the benefits for ties when receive multidisciplinar educators, spee audiologists, occ	young children with disabili- ring services designed by y team (e.g., parents, regular ch and language pathologists, cupational and physical health care, mental health									
Knowledge of: 4. developmental s a. pre- and pe	equences crinatal development									
1. proper	care and delivery.									
matern	of genetics, environment, all health and nutrition, and octors on the developing fetus.									
b. child develo	ppment									
-	ices of development and the lationship among developmenas.									
their in	y and motor development and iffuence on later cognitive, tual, and language skills.									
	relopment of receptive and sive communicative compe-									
	relopment of perceptual g and skills.									
	tion and initiation and their omental significance.									
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KNOWLEDG	KNOWLEDGE OF DISABILITIES					PIDI		PULLY CONFIDENT		
		8	A	0	8	A	0	8	A	0
such a format	relopment of cognitive skills sproblem-solving, concept ion, memory, learning, imitadd attention.									
	ration, socio-emotional devel- t, and play behavior.									
	relopment of self-help skills aptive behaviors.									
	al maturation, including and nutritional needs.									
5. impact of environ	nment									
cultural, soci	interactions among familial, al, and physical environ- hance/prevent maximum evelopment.									
	nd physical environments ir influences on development.									
	nging environmental needs of cloping child.									
	ence of the young child on and social environments.									
b. theory and a developmen	research in typical child t.									
1. major th	eories of child development.									
2. relevant processo	research in developmental									
6. impact of medica conditions	l, biological and genetic									
a pre-and per	natal developmental risk.						C 11 5 A	n 🔼	F)II F	ا ۽
family h	ts of risk factors such as story or behavior, medical ations, and gestational age.			EST)PY	AVP	A A	CLE	
	biological and genetic	47								

KNOWLEDGE OF DISABILITIES	UNC				SOMEWHAT CONFIDENT			ULLY	
	8	A	0	8	A	0	8	A	0
b. risk factors and their effects on early development.									
medical and biological conditions that develop after birth.									
 specific implication of the child's special developmental needs on the development of socio-emotional, sensory, motor, language, cognitive, perceptual, and self-help/adaptive skills. 									
c. research related to risk factors and child development.									
7. current trends and practices in medical intervention.									
3. current trends in therapeutic, developmental and educational intervention.									
48							i		
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ASSESSMENT	UN	CER	TAIN		MEW	HAT ENT	_	TULL:	
	8	A	0	8	A	0	8	A	0
CHILD FIND/SCREENING								_	
Awareness of:								 	
the importance of conducting child find activities to locate young children who are eligible and/or potentially eligible for EEE services.									
 the value of screening activities in providing opportunities for all families to learn more about their child's development. 									
Knowledge of:									
3. child find procedures.								}	
4. screening instruments and procedures.									
 what research indicates as "best practice" for establishing child find systems and conducting screening. 									3
COMPREHENSIVE EVALUATION									
Awareness of:							1		
 importance of conducting a comprehensive evaluation of a young child, including determi- nation of family concerns and priorities, for the purpose of making decisions relative to diagno- sis, eligibility, placement and planning for specialized services. 									
Knowledge of:									
 a variety of appropriate assessment instru- ments and procedures for children birth to three who are potentially eligible. 									
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PLANNING and IMPLEMENTATION	UNC	ERTA	714		(FW)				
	8	A	0	8	A	0	8	A	0
IEP									
Awareness of:									
 the importance of developing a IEP that inte- grates the results of a multidisciplinary team evaluation, input from the child's parents and individual team members and the curriculum of the program the child attends. 									
Knowledge of:									
2. current trends and practices in medical intervention for eligible children and families.									
3. current trends and practices in therapeutic, developmental and educational intervention for eligible children and their familie.s	ır								
4. various intervention service delivery models, including strengths and limitations of those models									,
 the commercially available norm-based, crite- rion-based and curriculum-based curricula for enhancing child development and skill acquisi- tion. 									
6. the components of a comprehensive interven- tion service delivery system for eligible children and their families.	1								
 the legal, philosophical, developmental, and ecological foundations of intervention practices and their impact upon planning, implementing and evaluating services. 									
8. "best practices" related to comprehensive early intervention services for children birth to three									
9. best practices related to comprehensive early intervention services for children three to five.									
10. current trends in evaluating programs for eligible children.									Ī
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PLANNING and IMPLEMENTATION	UNC	erta	IN .	SOM	EWH	IAT NT	PULLY CONFIDENT		
	8	A	0	8	A	0	8	A	C
11. community resources (programs and services available for families and how to network with those resources).									
12. roles and functions of families and individuals representing varying disciplines and agencies that comprise an early intervention team.									
								·	
٠.									
51									

TRANSITION	UNC	ert/	TIM		PIDE					
	8	A	0	8	A	0	8	A	0	
Awareness of:										
1. the importance of careful planning in successfully transitioning of a child from Part H services to Part B services, from one early care and education program to another or into the local kindergarten classroom.			-							
Knowledge of:										
2. the critical activities related to the transition planning process (e.g., providing necessary information to key individuals, establishment of a transition planning team, communicating with the receiving program).										
3. "best practices" related to transition.										
4. strategies for promoting the child's successful participation in activities of the next setting.										
5. family priorities and concerns and of child characteristics that are pertinent to the development of a transition plan.										
52										
52										

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	PROGRAM ADMINISTRATION	UNC	erta	TIN .		(EW)		1	(FID	-
		8	A	0	8	A	0	8	A	0
Kr	owledge of:									
1.	knowledge of current trends and practices in evaluating programs for eligible infants and toddlers and their families									
Tr	ninees will demonstrate:									
2.	knowledge of the components of various early intervention service delivery models, including the professionals, management systems, facilities, program materials, and budgetary resources required to implement the services.									
3.	knowledge of major sources of federal and state funds supporting early intervention services.									
4	knowledge of issues in management of fiscal responsibilities.									
5	knowledge of the role, activities, and purpose of establishing a community-based interagency planning teams to support the activities of an early childhood special education program.									
6.	knowledge of the legal, philosophical, develop- mental and ecological foundation of early intervention practices and their impact upon planning, implementing, and evaluating ser- vices.									
8 F I	li in:									
7 .	ability to analyze the resources and needs of a community.	-								
8.	ability to participate in the implementation and evaluation of early intervention services.									
9.	ability to articulate a program philosophy and related goals and identify supporting program policies, practices, and activities.									
10.	ability to articulate and discuss current laws. regulations, initiative and best practices relative to the design, implementation, and evaluation of early childhood special education services.									
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Appendix C

Training Strand for Master's In Special Education with an Leadership



Vermont LEEDS Graduate Program

Guidelines for Developing a Portfolio for the Leadership Strand and Program Competencies



Portfolio Guide Contents

Why Develop a Portfolio?

The Six Philosophical Assumptions

Practica Requirements

Self Assessment of Core Competencies: Category One

Self Assessment of Competencies: Category Three Leadership



Portfolio Guide Contents

Why Develop a Portfolio?

The Six Philosophical Assumptions

Practica Requirements

Self Assessment Of Core Competencies

Self Assessment of Category Three Competencies



Why Develop A Portfolio?

A portfolio serves as a site for documentation of your professional development. It is a dynamic form of documentation, emerging and changing as you develop as a professional. Developing a portfolio is somewhat like creating a photo album. As a photo album serves to give visual evidence of the growth and development of your family, a portfolio provides evidence of your growth and development as a professional.

Your portfolio should document your leadership activities, those activities based on practica requirements and agreed upon by your faculty supervisor, field supervisor and yourself and outlined in your Plan of Operation. Additionally, it will include your action-based research project which is required of all students in the Leadership strand as part of EDLP 295. Trainees are expected to design and implement an applied research study which addresses an identified challenge within an organization supporting the needs of eligible children and their families. As part of this experience, trainees will participate in the planning and implementation of a needs assessment to identify areas of potential change and utilize the study's outcomes to develop strategies for program improvement.

Completion of this portfolio will serve as a testimony to your proficiency as a leader in early childhood special education and demonstrate your leadership skills, including team building, curriculum development, organizational and fiscal management, collaboration, facilitation, strategic planning and public relations. It will also demonstrate your commitment to and competence in creating, supporting and providing services that are inclusive, family-centered, culturally competent, collaborative, developmentally appropriate and that reflect the uniqueness of early childhood as a developmental phase.



The Six Philosophical Assumptions

Inclusion

Inclusion involves not merely the physical placement of a child with disabilities in the same setting with other typically developing children of a similar age, but the true involvement of that child in the interactions and activities of occurring to the greatest degree possible. Educators who are committed to inclusion are able to integrate their knowledge of the needs of young children with disabilities and appropriate interventions with an ability to provide age appropriate and individually appropriate services to all of the children with whom they work. Educators committed to inclusion can function in the diverse range of community settings in which young children and families receive services and can modify or adapt activities and materials to address the diverse, individual needs of young children and their families.

Developmentally Appropriate Practice

The design of learning opportunities that facilitate children's active engagement and participation in their environment is critical to providing an environment that supports children's optimal development (Bredekamp, 1987). Such learning opportunities should maximize children's opportunities to make choices, value children's interests, and emphasize play and enjoyment. Careful planning that reflects an understanding of both age appropriate and individually appropriate practice is an essential activity of educators providing early care and educational services to young children, including those with disabilities.



Cultural Competence

All development and learning occurs within and is influenced by a cultural context. There are essentially five elements of cultural competence: a) valuing diversity; b) cultural assessment; c) dynamics of difference; d) institutionalization of cultural knowledge; and e) adaptation to diversity. Culturally competent educators are aware of their own values and how they have impacted their lives, but are able to separate their personal value judgments when working with children and families with diverse experiences and backgrounds. Culturally competent practitioners seek to learn about and respond to families in an individually appropriate and culturally appropriate manner.

Uniqueness of Early Childhood as a Developmental Phase

The unique developmental needs of young children require a supportive learning environment structured to be responsive to those needs (Carta, Schwartz, Atwater & McConnell, 1991). A knowledge of the sequence of development (birth to 5), an understanding of the interrelationship between the development of young children and the impact of disability on development, and subsequent implications for intervention are essential to the intervention process (McCollum, 1989; ATE & NAEYC, 1991a).

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Family Systems and Family-Centered Approach

Establishing relationships with families ensures continuity between families and providers (Powell, 1994). These relationships should be built on mutual support of each other's roles, upon a commitment to joint decision-making, and upon respect for family choices and preferences for their level of involvement (Garshelis & McConnell, 1993). Competent family-centered practitioners understand the experiences of families of young children, including those with disabilities; are knowledgeable about specific strategies to establish and maintain productive relationships with families with diverse needs, experiences, and preferences; and clearly understand specific legal requirements (Wolery, Strain, Bailey, 1992; Bredekamp, 1993).

Inter- and Intra-Professional Collaboration

Collaborative relationships with family members, peers of the same discipline, and individuals from other disciplines as members of teams are essential to ensure the provision of family-centered, culturally competent, services that support the full inclusion of young children with disabilities in community settings. In addition to the provision of direct service, effective professionals consult with colleagues, build interpersonal relationships, communicate with related service professionals, and provide technical assistance to others.



Leadership Strand Practica Requirements

- **a. EEE Program Teams.** Trainees will participate in the Supervisory Union Early Childhood Program's monthly meetings. This group processes referrals, reviews child progress and administers the EEE program.
- b. Community Based Early Childhood Teams. Trainees will participate in the development and encouragement of community-based early childhood teams that were developed to support early childhood needs specific to a community. Teams shall be comprised of parents, educators, child care providers, business leaders and legislators.
- **c. Curriculum Development.** Trainees will participate in the Curriculum Development Project to ensure that early childhood curriculum across inclusive community settings is aligned with Developmentally Appropriate Practices. The committee is comprised of school based educators, child care providers and private preschool teachers.
- d. Interagency Collaboration. Trainees will participate on interagency teams working towards coordination of services for young children with disabilities and their families, including the Franklin County Early Childhood Advisory Council (serves as the advisory board for EEE, Head Start, Success by Six, Child Care Services) and the Franklin County Protection Team.
- e. Advocacy. Trainees will participate in advocacy efforts including sponsorship and organization of community forums, candidate forums, and public relations around issues affecting young children and their families.
- f. Education. Trainees will participate in the 1) development of a coordinated county-wide training system that involves interagency design and collaboration and 2) planning and coordinating training opportunities such as the annual Northwest Vermont Early Childhood Conference.



g. Funding. Trainees will help to identify funding sources and participate in pursuing grants.



Vermont LEEDS

Self Assessment of Core Competenci	es
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Trainee:	Date:
Discipline:	Core Faculty Advisor:

In order to provide you with the most valuable experience possible through the Vermont LEEDS Graduate Program, it is important that we know the confidence level you have in each of the competency areas that will be emphasized. It is also important to obtain input from your core faculty advisor/mentor and other community supervisors with whom you will be working.

The confidence levels for this self assessment have been broken down into uncertain, somewhat confident, and fully confident. Your rating of yourself should be placed under 8 (self). Your core faculty advisor/mentor will place his/her rating under A (advisor). Collaborators in the community will place their rating under O (other).

As a pre-assessment, this information will be used to help you develop—your Training Plan in collaboration with your core faculty advisor/mentor. As a dynamic assessment tool, it will provide a way for you to monitor your progress throughout your training experience with the input of your core faculty advisor/mentor and community supervisors or collaborators. As a post-assessment, this information will be used to determine the acquisition of all program competencies.



Category One Competencies

- 1. Uniqueness of Early Childhood as a Developmental Phase
 - 2. Family-Centered Approach
 - 3. Developmentally Appropriate Practice
 - 4. Inclusion
 - 5. Cultural Competence
- 6. Collaborative Interpersonal and Interprofessional Actions



	Queness of Early Childhood S A Developmental Phase	UNC	ERT	AIN		MEW NFID			TULL!	-
		8	A	0	S	A	0	8	A	0
A. Traine	es will demonstrate:									
1. Know	eledge of pre- and perinatal development.		 							
a.	proper care and delivery.									
b.	effects of genetics, environment, maternal health and nutrition, and other factors on the developing fetus.									
2. Know	ledge of child development.									
a .	sequences of development and the interre- lationship among developmental areas.									
b.	sensory and motor development and their influence on later cognitive, perceptual, and language skills.						,			
c.	the development of receptive and expressive communicative competence.									
d.	the development of perceptual learning and skills.									
e.	motivation and initiation and their develop- mental significance.									
f.	the development of cognitive skills such as problem-solving, concept formation, memory, learning, imitation and attention.									
g.	socialization, socio-emotional development, and play behavior.									
h.	the development of self-help skills and adaptive behaviors.									
1.	physical maturation, including health and nutritional needs.									
3. Impac	t of environment									
a .	knowledge of interactions among familial, cultural, social, and physical environments that enhance/prevent maximum growth and development.									
	1. social and physical environments and their influences on develop ment.	8		,						



UN	iguen As a	iess of Early Childhood Developmental Phase	UN	C E R1	(AIN		MEW NFID			VFID:	
			8	A	0	8	A	0	s	A	0
	2.	the changing environmental needs of the developing child.									
	3.	the influence of the young child on physical and social environments.									
b.	theory ment.	and research in typical child develop									
	1.	major theories of child development.									
	2.	relevant research in developmental processes.									
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,											
<u>IC</u>		· · · · · · · · · · · · · · · · · · ·	9								

FAMILY-CENTERED APPROACH	UNG	CERT	TAIN	SOI						
	8	A	0	8	A	0		s	A	•
Awareness of:								1		
the importance of viewing children in the context of their families.										
2. the importance of viewing families in the context of their community.										
Knowledge of:								1		
 family systems (including family resources, characteristics of family and the individual members, and methods for meeting individual needs). 										
4. relationships between family members and family subsystems.										
 family life cycle and the sequence of changes that occur as they progress through life events and major stages of life. 										
factors that affect family functioning (e.g., birth of a child with a disability, availability of support).										
Skill in:										
7. gathering information from families in a way that is comfortable for family members.										
8. creating opportunities for families to share concerns, priorities, and resources on an ongoing basis.										
building upon family-identified strengths and abilities.									·	
10. encouraging families to identify informal networks and utilize them for support.										
11. communicating with families in a culturally competent manner.										
12. promoting the acquisition of parent knowledge, skills, and confidence.										
13. including families in all planning and decision-making activities at whatever level families choose to participate based on their values, resources, and priorities.			ST (YA	VAI		ĎЫ		



FAMILY-CENTERED APPROACH	UNC	ert/	IN		EWH		_	ULLY	
	8	A	0	8	A	0	8	A	0
14. facilitating the development of assessment and intervention plans that respect family values and styles of decision making and are shaped by family priorities and information needs as well as by child characteristics and diagnostic concerns.		-							
15. offering help that matches the family's appraisal of their needs.									
16. providing services that minimize disruption in daily family schedules or activities.									
17. strengthening family-community linkages.									
18. facilitating coordination of services and supports.									
19. seeking input and feedback from families regarding service planning and delivery, evaluation of services, and program policies and practices.									
7									
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DEVELOPMENTALLY APPROPRIATE PRACTICE	UNC	ert/	VIN .		EWI FIDI		F		
· · · · · · · · · · · · · · · · · · ·	8	A	0	s	A	0	s	A	0
Awareness of:									
 the importance the stages and sequences of child development. 									
2. the effects of environmental interactions on child development.									
3. the importance of play in children's learning and development.									
4. the importance of matching play materials and activities to a child's developmental levels and chronological age.									
Knowledge of:									-
5. developmental sequences of child development.									
6. the interrelationship among developmental areas.									
 the interactions among familial, cultural, social and physical environments that enhance development or prevent a child from achieving maximum growth and development. 									
 play's influence and importance in motor, social, emotional, language, and cognitive development. 									
9. the sequential development of play.									
10. developmentally appropriate toys and materials.									
11. research related to child development and the factors influencing that development.									
Skill in:									
12. recognizing and articulating an individual child's repertoire of play behaviors and inter ests in the context of that child's development through play-based observation.									
13. designing an optimal play environment appropriate to varied developmental levels and individual children's interests, strengths and, needs.									
72							İ		



DEVELOPMENTALLY APPROPRIATE PRACTICE	UNCERTAIN			SOMEWHAT CONFIDENT					
	8	A	0	8	A	0	8	A	0
14. facilitating play using techniques such as modeling, imitation, elaboration and scaffold ing.									
15. developing activities that emphasize learning as interactive process, creating an environment that allows children to learn through active exploration and interaction with adults, other children, and materials.									
16. integrating information from parents about their child's likes, dislikes, strengths, and needs incurriculum planning.									
17. designing and choosing materials that are, concrete, and relevant to the lives of young children.									
18. designing and choosing materials that are appropriate for a wider range of developmental interests and abilities than the chronological age range of the group would suggest.									
19. including multicultural, non-sexist, and anti- biased experiences, materials, and equipment as an integral part of the curriculum.									
20. providing a balance of indoor and outdoor activities.									
21. developing, implementing and evaluating a curriculum that addresses all areas of development including physical, social emotional, communication, and cognitive through and integrated approach (e.g., curriculum planning ensures that activities designed to stimulate one area of development and learning enhance other areas as well).									
22. modifying or adapting goals and activities to address the individual needs of children and their families.				·					
23. developing, in partnership with family mem bers and other professionals, a curricular philosophy and supporting goals and activities.									
E BEST COPY AVAILABLE 73									

INCLUSION	UNC	ERTA	IN	-	SOMEWHAT CONFIDENT			PULL NP ID	
	S	A	0	8	A	0	8	A	0
Awareness of:							-		
 my own beliefs, values and attitudes about children and families who have different challenges and abilities from me. 									
the existence of legislation that articulates the rights of children and adults with disabilities.									
 the design and implementation of comprehensive intervention service delivery systems is determined by state and federal legislation and policy. 									
 the various early care and education place ment options for young children in the com munity. 									
Knowledge of:									
 research related to the impact of inclusive environments on children with and without disabilities and their families. 									
 the exiting federal and state legislation impact- ing intervention services for children birth to five. 									
7. the concept of least restrictive environment.									
8. various early intervention service delivery models, including strengths and limitations of those models.									
 the legal, philosophical, developmental, and ecological foundations for inclusion of children with disabilities with their typically developing peers in naturally occurring settings in their own communities. 									
10. the impact of medical, biological and genetic conditions on a child's development of socio-emotional, sensory, motor, language, cognitive, perceptual, and self help/adaptive skills.									
11. current trends and practices in therapeutic, developmental and educational intervention.									
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INCLUSION	UN	C ER 1	AIN		AEW!		_	VILL	_
	S	A	0	S	A	0	8	A	0
Skill in:		ł							
12. developing, implementing, and evaluating a curriculum collaboratively with parents and other professionals which addresses the developmental needs, interests and strengths of children of all abilities.									
13. developing a curriculum philosophy for an inclusive classroom, in partnership with family members and other professionals.									
14. facilitating play of children of various developmental levels and providing play-based intervention.									
15. designing optimal play environments for children of varying developmental levels.									
16. modifying or adapting goals, skills, activities and materials to address the individual needs of the child and family.									
17. functioning as a member of a transdisciplinary intervention team.									
18. evaluating goals and activities in terms of how they relate to the successful inclusion of all children									
	:								
75									

CULTURAL COMPETENCE	UNC	ERT	AIN	1		HAT ENT	C	PUI ONPI	LY DENT
	8	A	0	8	A	0	8	A	0
Awareness of:									
 the understanding that cultural values and beliefs are learned, have historic roots, and are the basis of our judgements. 									
 diversity as a benefit, rather than abnormal or inappropriate, and that each culture finds some values more important and some behaviors more desireable than others. 									
 ways in which my cultural values, beliefs and attitudes impact on the way I interact with children and families with diverse needs and from diverse backgrounds. 									
4. ways in which the cultural values, beliefs and attitudes of families impact on their behavior and participation with the professionals who work with them.									
 verbal and nonverbal communication styles used in various cultures. 							}		•
6. ways in which the provision of services impacts families' opportunities to participate.									
Knowledge of:		Î							
7. the social environment (family, community, school) and its impact on the development of infants, toddlers and preschoolers with, or at risk for, developmental delays or health impartments, and their families.									
8. strategies for gaining information about beliefs and practices of various ehtnic minority heritages.									
 specific cultures including their beliefs about disability, child rearing practices, and professionals. 									
10. the culture of the organization in which you are interacting and how it impacts those whose culture is different.									
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CULTURAL COMPETENCE	UNC	erta	M		ewh Fide		_	ULLY IFIDI	-
	8	A	0	8	A	0	8	A	0
11. diverse cultural, socio-economic, develop mental and psychological influences on team members functioning together.									
11. research related to the effects of cultural values and beliefs on behavior and practices of.									
Skill in:									
12. interacting with children and families of diverse cultural and ethnic heritages in a cultrually competent manner.									
13. providing services including child find, assessment, child care, and service coordination with increased cultural sensitivity.									
14. developing skills for cross cultural communication.									
15. using community contacts and consultants to answer culturally related questions.									
16. institutionalizing activities which respond to conflicts and confusions caused by the dynamics of difference.									
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COLLABORATIVE INTERPERSONAL AND INTERPROFESSIONAL ACTIONS	UNC	CERT	AIN		`	THAT DENT	1 .	PULI NFI	Y DEN	т
	8	A	Ò	8	A	0	8	A	0	
Awareness of:										
 my own behavioral style or temperment and it's impact on my interactions with others. 										
2. my strengths and needs as a member of a team.										
 the formal and informal services, and place ments available to young children and thier families in the community. 										
Knowledge of:										
 the functions, scope and eligibility criteria of the various agencies and services in the community available for young children and their families. 										
5. roles and functions of families and individuals representing varying disciplines and agencies within a team.										
6. varying models of team organizations										
7. adult learning styles										
8. diverse cultural, socio-economic, developmental and psychological influences on team members										
9. the roles and functions of a consultant, and the appropriate use of a consultant										
State Initiatives and Legislation										
10. the mandates, activities, funding, population served and relationships between various state and federal programs and initiatives for young children and their families including:										
a) Success by Six b) Early Education Initiative c) Head Start d) Fesential Farty Education										
d) Essential Early Education e) Family, Infant and Toddler Project f) Child Care Services d) Children with Special Health Needs e) Healthy Babies										
f) I Team										
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COLLABORATIVE INTERPERSONAL AND INTERPROFESSIONAL ACTIONS	UNC	CERT	AIN		MEW			ULLI	ENT
	8	A	0	8	A	o	8	A	0
11. the context, intent, and requirements of the Federal and State legislation relating to young children and young children with disabilities including:									
a) IDEA b) ADA c) Title V d) Social Security-Medicaid e) Section 504									
12. knowledge of community resources (programs and services available for families and how to network with those resources).									
13. ability to establish and maintain effective family and interagency cooperation.									
14. knowledge of and sensitivity to diverse cultural, socio-economic, developmental and psychological influences on team members.									
15. knowledge of strategies for facilitating team meetings which include family members and professionals from different disciplines									
Skill in:									
16. formulating and following a professional code of ethics with associated responsibilities.				į					
17. evaluating personal strengths and needs.									
18. networking with community resources.									
19. effective listening, speaking and problem solving.			;						
20. strategies for facilitating team meetings which include family members and prfoessionals from different disciplines.									
21. ability to plan, establish and maintain effective family, interdisciplinary and interagency cooperation.									
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COLLABORATIVE INTERPERSONAL AND INTERPROFESSIONAL ACTIONS	UNCI	ERTA	IN)MEW)NFIL		_	PULL	
	s	A	0	8	A	0	8	A	(
22. cooperative group learning including: a) establishing mutual goals b) determining functions of team members c) sharing information d) resolving conflicts and solving problems e) providing feedback f) evaluating the effectiveness of the group process									
23. planning, implementing and evaluating training activities for promoting the acquisition of new knowledge or skills.									
24. establishing, implementing and maintaining a consultative relationship with family members and other key individuals (such as child care providers or therapists).									
·									
80									

Vermont LEEDS

Self Assessment of Category Three Competencies

Trainee:	Date:
Discipline:	Core Faculty Advisor:

In order to provide you with the most valuable experience possible through the Vermont LEEDS Graduate Program, it is important that we know the confidence level you have in each of the competency areas that will be emphasized. It is also important to obtain input from your core faculty advisor/mentor and other community supervisors with whom you will be working.

The confidence levels for this self assessment have been broken down into uncertain, somewhat confident, and fully confident. Your rating of yourself should be placed under S (self). Your core faculty advisor/mentor will place his/her rating under A (advisor). Collaborators in the community will place their rating under O (other).

As a pre-assessment, this information will be used to help you develop—your Training Plan in collaboration with your core faculty advisor/mentor. As a dynamic assessment tool, it will provide a way for you to monitor your progress throughout your training experience with the input of your core faculty advisor/mentor and community supervisors or collaborators. As a post-assessment, this information will be used to determine the acquisition of all program competencies.



Category Three Competencies

- 12. Inquiry, Reflection and Action
- 13. Communication and Relationships
- 14. Organizational Renewal and Change
- 15. Systems Context and Management
 - 16. Teaching and Learning



Category Thr	ee Competency Area	UN	CER1	AIN		MEW NFID		1 -	y Ent	
		8	A	0	8	A	0	S	A	0
Inquiry, Reflecti	on and Action									
	evaluate qualitative and quantitative form leadership practices									
•	nplement a research study to address challenge within a specific organization									
	nes of research study to develop affect program improvement									
	the planning and implementation of it/evaluation project and identify itial change									
Communication	and Relationships									
partnerships	eful collaborative networks and among parents, community members, professionals and educators									
associated wit	n to promote the vision and outcomes th the organization and engage public pport for continual reflection and									
and external tenriching the	I respect diverse perspectives within to the organization for the purpose of organizational context and relationhat environment									
interpersonal	velop effective communication and skills that encourage problem problem-solving and evaluation of									
adult develops	nd utilize the nature and theories of nent, learning, and career stages at leadership and professional									
Organizational R	enewal and Change							T		
and style in re	nine one's own leadership dispositions clation to theory and knowledge to capacity as a caring, effective leader									
tional develop	nd apply the knowledge of organiza- ment and change theory to the design station of leadership strategies and	83								

		UNC	ER1	AIN		(EW)					
		8	A	0	8	A	0	8	A	1	
3.	Develop an understanding of future trends as it relates to strategic planning and purposeful change										
4.	Understand and analyze foundational and conceptual frameworks for professional staff development and their implications for creating learning environments that value reflection and renewal										
Soc	ial Institutions and Equity										
1.	Critically analyze societal forces that place community members in conflict with one another around their assumptions about issues of justice, equity, freedom and diversity										
2.	Knowledge of the interrelationships among ideology, power, and sociohistorical context associated with access to opportunities										
Syst	tems Context and Management										
1.	Articulate a personal viewpoint on the relationship between organizational values and financial planning and resource allocation										
2.	Develop skills and knowledge relative to fiscal planning and management, and apply appropriate accountability techniques to evaluate the extent to which resources are used effectively and in alignment with organizational values and mission										
3.	Understand and utilize the principles of relevant federal and state laws to create environments characterized by fairness, equity and justice										
4.	Develop skills and knowledge relative to human resources management in a diverse environment, including personnel planning, recruitment and hiring, performance appraisal and compensation, in support of organizational values and mission										
5.	Understand and effectively utilize technology to enhance and support leadership and instruction										
Teac	ching and Learning										
1.	Understand historical and contemporary curricular and instructional issues and their	8 4									

		UNC	ERT	AIN		MEW VFID	HAT ENT	_	VFID	_
		ø	A	0	8	A	0	8	A	0
	implications for curriculum planning, design, implementation and evaluation					_		,		
2.	Examine and analyze the role that societal issues have played in the formation of curricular and instructional knowledge									
3.	Utilize research on curriculum and instruction to inform and justify the selection of teaching and learning strategies that reflect the diverse needs of learners				·					
4.	Understand general systems theory and its application to the design, implementation, and evaluation of teaching and learning processes									
5.	Understand fundamental psychological aspects of learning theories and their relationship to curriculum and instruction, particularly for emerging populations									
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		-	<u> </u>	<u> </u>	-	<u> </u>	-	+	-	+
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Appendix D Evaluation Data

- * Evaluation of University Supervisor
 - * Evaluation of Advisor
 - * Course Evaluations
- * Evaluation of the Overall Program



Evaluation of the University Supervisor By Intern (Summary of Evaluation Data Fall)

Intern:		
Supervisor:	 	
Date:		

The rating scale is based on a 1-5 rating with 1 being a poor score and 5 being excellent.

Question	1	2	3	4	. 5
Availability of University Supervisor.	0%	0%	0%	0%	100%
2. Quality of University Supervisor's feedback and ability to refer you to appropriate resources.	0%	Ο%	0%	.2%	99.8%
3. Quality of University Supervisor's support to complete program requirements.	0%	0%	0%	.2%	99.8%
4. Quality of University Supervisor's professional behaviors (e.g., friendly, courteous, punctual).	0%	Ο%	0%	· .2%	99.8%
5. University Supervisor's knowledge of best practices in the development, implementat and evaluation of early intervention services.	0% ion	0%	0%	0%	99.8%



Evaluation of the University Advisor By Intern (Summary of Evaluation Data)

Intern:	
Advisor:	<u> </u>
Date:	

The rating scale is based on a 1-5 rating with 1 being a poor score and 5 being excellent.

Question	1	2	3	4	5
1. Advisor's Availability.	0%	0%	0%	.2%	99.8%
2. Quality of Advisor's Recommendations and ability to refer you to others for appropriate advice.	0%	0%	Ο%	0%	100%
3. Advisor's Overall Professional Behavior (e.g., scheduling necessary meetings, amount of time needed to respond to requ for advice, etc.).		0%	0%	0%	100%
4. Quality of Advisor's rapport with you (e.g., frie courteous, punctual).	0% endly,	0%	0%	0%	100%
5. Quality of Advisor's knowledge of Curriculum Materials.	0%	0%	0%	0%	99.8%
6. Quality of Advisor's Knowledge of Behavior Analysis and Other Intervention Methodologie	0% es.	0%	0%	.2%	99.8%



7. Quality of Advisor's Knowledge of Educational Assessment.	0%	0%	0%	0%	100%
8. Quality of Advisor's Ability to Encourage You to Continue Your Professional Development.	0%	0%	0%	0%	100%



<u>Teaching</u>

- 1. What to you were the most beneficial aspects of this course?
 - * A lot of very interesting discussion. A great deal of information about infants and play.
 - * Information on infant development. The variety of perspectives and quality of information as well as the format was great.
 - * Much information was given through discussion rather than through lectures.
 - * The cross-exposure to many topics/teachers- opportunity to dialogue with colleagues in a safe, supportive area.
 - * Help in Understanding Family-Centered.
 - * The colleagues I met through other students. The great skill of Angela Capone to guide discussions.
 - * The opportunity to share ideas, questions, concerns, etc., with the women who work in early intervention. A real gathering of peers who have a lot to probe, and do it well together.
 - * Dialogue and perspectives of the instructor.
 - * Discussion of readings.
 - * Expertise of the instructor- ability to look at issues in many ways simultaneously
- 2. What aspects of the course do you feel should be improved upon or deleted?
 - * Break of modules was difficult for me.
 - * Clearer directions on the product expectations for me would be helpful.
 - * I cannot honestly think of aspects to improve or delete.
 - * There was some confusion over assignments in play-based portion.
 - * Too much time on student presentations.
- 3. Do you feel that additional activities should be added to the course?
 - * No!
 - * Perhaps more time to view kids and set ups in action.
 - * Maybe this should be a pass/fail course
- 4. Would you recommend this course to other students? Why?
 - * Yes- quality of teaching, opportunity for network with peers, usefulness of information.
 - * Yes. all.
 - * Absolutely, this would be valuable for any family worker.
 - * Yes anyone who works with babies needs this information.
 - * Yes, information was very useful.
 - * Yes, a valuable exchange of ideas and information.
 - * Yes, this course explored issues that are not explored enough, if at all, in the early childhood field- GREAT COURSE!



Supervision

* Angela quickly became my mentor in every sense of the word.

Because I was in a difficult placement, I really needed a lot of support and feedback provided on a constant basis.

* Angela made me feel valued as a professional and this gave met the confidence necessary to "forge ahead" with my ideas/methods.

- * Of all the things I value most in my relationship (supervisor-student) I think the most treasured one was that she provided an atmosphere of safety. I always knew I could go to her with questions.
- * She provided the chance for a lot of dialogue between us as to the ethical practice and ways to create change in a non-threatening manner- both of which are ongoing issues in a professional sense.
- * I really feel that her expertise and support enabled met to not only establish an infant program- but also provide quality services.
- * Couldn't ask for a better supervisor and mentor.



<u>Advisina</u>

- * Always willing to answer a quick question and have a long discussion.
- * Always supportive to clarify issues.
- * Knowledgeable of intervention strategies.
- * Always encouraging to continue professional development.
- * Angela has provided me with a great deal of assistance, encouragement, and valuable information.
- * Angela encouraged and challenged me to continuously evaluate and re-evaluate my work as well as taking it a step further.
- * I felt a great deal of support and as a result consistently turned to Angela for assistance.
- * Angela definitely played an integral role in my learning and development over the year.



Overall Program Evaluation

- 1. Strengths of the Program
 - * Great knowledgeable instructors!
 - * Practical materials- very usable. Internship- excellent use of time.
 - * The faculty, knowledgeable and supportive.
 - * Flexibility of supervisors.
 - * Faculty enthusiasm and interest in their work.
 - * Quality of instruction, comprehensives of areas covered.
 - * Practicum/internship was possible through my present work experience enhancing established philosophies and conditions.
 - * The availability of courses offered locally.
 - * The diverse expertise of the faculty members.
 - * Hands on experiences provided frequently.
- 2. What improvements would you suggest?
 - * The distance (off-campus program) often made it difficult to have time with advisors.
 - *I would have liked greater ties to the on-campus program (students and faculty).
 - * The Reach-Out program should have been done in three years instead of two.
 - * The foundation course did not provide a foundation (EDFS).



Special Education Graduate Survey (Summary of Evaluation Data)

Program Evaluation Items

For each item, mark the letter on the data sheet which seems most appropriate. The highest possible rating is E. The lowest is A with three gradations between.

Question	A	В	C	D	E
5. The program met its state philosophy.	0%	0%	0%	42.9%	57.1%
6. Course contained up to date information.	0%	0%	0%	14.3%	85.7%
7. Size of classes were conducive to learning.	0%	Ο%	Ο%	0 %	100%
8. Format/structure of classes were conducive to learning.	0%	0%	0%	42.9%	57.1%
9. Courses prepared students to meet their professional objectives.	0%	0%	14.3%	50%	35.7%
10. Practicum experiences prepared students for professional roles.	0%	0%	0%	61.9%	38.5%
11. Practicum experience complemented course work.	0%	0%	0%	14.2%	85.7%
12. Faculty were effective teachers.	0%	0%	0%	28.6%	71.4%
13. Faculty knew subject matter.	0%	0%	0%	7.1%	92.9%
14. Faculty were professional role models.	0%	0%	0%	21.4%	78. 6 %



15. Faculty were supportive of student development in and out of class.	0 %	0%	Ο%	14.3%	85.7%
16. Faculty served as mentors.	0%	0%	7.1%	35.7%	57.1%
17. Faculty provided advising and assistance that was responsive to student personal and professional needs.	Ο%	0 %	O%	42.9%	57.1%
18. Faculty provided advising and assistance that was responsive to student scholarly needs.	0%	0%	0%	28.6%	71.4%
19. Faculty met with students in a timely manner.	O%	O%	0%	42.9%	57.1%
20. Faculty encouraged students to bring diverse perspectives to discussions.	0%	0%	7.1%	28.6%	64.2%
21. Program encouraged students to support each others professional development.	0 %	O%	4.0%	32.7%	64.2%
22. The program 0% provided a sense of continuity and cohesiveness.	O%	O%	57.1%	42.9%	
23. There was a balance structure and flexibility in the program.	O%	O%	7.1%	28.6%	64.2%
24. Program provided an atmosphere which supported student development.	0 %	O%	0 %	28.6%	71.4%
25. Program provided an appropriate breath of	0%	0%	0%	28.6%	71.4%



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$\boldsymbol{\sigma}$	-	ugo.

26. Program provided an appropriate breath of technical skills.	0%	0%	11.2%	42.9%	45.9%
27. Program provided an appropriate breath of collaboration skills.	0%	0%	7.1%	21.4%	71.4%
28. Course requirements were relevant to the demands of the profession	0 %	0%	5.1%	14.3%	78.6%
29. Program course work was intellectually challenging and stimulating.	0%	0%	3.6%	14.3%	82.1%
30. Courses were scheduled to be readily accessible to students.	0%	0%	0%	28.6%	71.4%





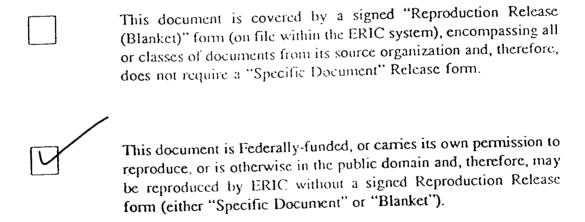
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NOTICE

REPRODUCTION BASIS





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